

COURT OF THE STATE/CITY OF NEW YORK
 COUNTY OF: DISTRICT OF SOUTHERN NY ATTORNEY: ROBERT D. MEADE, ESQ

20080319165509

THE WILLIAM PENN LIFE INSURANCE CO. OF NY
 - against -
 KIMBAL VISCUSO, ET AL

Petitioner(s)
 Plaintiff(s)
 Respondent(s)
 Defendant(s)

AFFIDAVIT
 OF SERVICE
 INDEX#
 08 CV 1141

STATE OF: NEW JERSEY - COUNTY OF: UNION ss:

PAUL SALAZAR, being duly sworn deposes and says deponent is not a party to this action, is over the age of 18 and resides in _____.
 That on date/time: 3/19/08 9:20 AM at 17 HADDEN ROAD SCARSDALE NY 10583
 deponent served the within: SUMMONS AND COMPLAINT.

Summons, Spanish summons & complaint, the language required by NRCRR 2900.2(e), (f) & (h) was set forth on the face of the summons(es)

On: CHARLES M BIRNS

Defendant Respondent Witness (hereinafter called the recipient) therein named.

INDIVIDUAL A By personally delivering to and leaving with said CHARLES M BIRNS
 and that he knew the person so served to be the person mentioned and described in said SUMMONS AND COMPLAINT.

CORPORATION B By delivering to and leaving with Michael Birns → FATHER
 at 17 HADDEN RD
 and that he knew the person so served to be the FATHER BIRNS of the corporation.

SUITABLE AGE PERSON C Service was made in the following manner after your deponent was unable with due diligence to serve the defendant in person:
 By delivering a true copy thereof to and leaving with Michael Birns,
 a person of suitable age and discretion at 17 HADDEN RD,
 the said premises being the recipient's Dwelling/Usual place of abode Actual place of business within the State of New York,

AFFIXING TO DOOR, ETC. D By affixing a true copy thereof to the door of said premises, the same being the recipient's
 Dwelling/Usual place of abode Actual place of business within the State of New York. Deponent had previously attempted to serve
 the above named recipient on/at: 1. _____ 2. _____ 3. _____
 Deponent spoke with _____ who stated to deponent that the said recipient(s)
 lived at the aforementioned address, but did not know recipient's place of employment.

MAILING TO RESIDENCE E1 Within 20 days of such delivery or affixing, deponent enclosed a copy of same in a postpaid envelope properly addressed to recipient
 to recipient's last known residence at 3124108 Mail
 and deposited said envelope in an official repository under the exclusive care and custody of the US Postal Service
 within New York State on _____.

MAILING TO BUSINESS E2 Within 20 days of such delivery or affixing, deponent enclosed a copy of same in a postpaid envelope properly addressed to recipient
 to recipient's actual place of business at _____
 in an official repository under the exclusive care and custody of the US Postal Service within New York State. The envelope bore the
 legend "Personal and Confidential" and did not indicate on the outside thereof, by return address or otherwise, that the communication
 was from an attorney or concerned an action against the recipient and mailed on _____.

F DEPONENT STATES THAT THE INDEX # AND FILING DATE WERE CLEARLY VISIBLE ON THE SUMMONS.
 DESCRIPTION OF THE RECIPIENT OR OTHER PERSON SERVED OR SPOKEN TO ON BEHALF OF THE RECIPIENT IS AS:

VOID WITHOUT DESCRIPTION	<input type="checkbox"/> Male	<input type="checkbox"/> White Skin	<input type="checkbox"/> Black Hair	<input type="checkbox"/> White Hair	<input type="checkbox"/> 14 - 20 Yrs.	<input type="checkbox"/> Under 5'	<input type="checkbox"/> Under 100 Lbs.
Use with A,B,C,D	<input type="checkbox"/> Female	<input type="checkbox"/> Black Skin	<input type="checkbox"/> Brown Hair	<input type="checkbox"/> Balding	<input type="checkbox"/> 21 - 35 Yrs.	<input type="checkbox"/> 5'0" - 5'3"	<input type="checkbox"/> 100 - 130 Lbs.
		<input type="checkbox"/> Yellow Skin	<input type="checkbox"/> Blonde Hair	<input type="checkbox"/> Moustache	<input type="checkbox"/> 36 - 50 Yrs.	<input type="checkbox"/> 5'4" - 5'8"	<input type="checkbox"/> 131 - 160 Lbs.
		<input type="checkbox"/> Brown Skin	<input type="checkbox"/> Gray Hair	<input type="checkbox"/> Beard	<input type="checkbox"/> 51 - 65 Yrs.	<input type="checkbox"/> 5'9" - 6'0"	<input type="checkbox"/> 161 - 200 Lbs.
		<input type="checkbox"/> Red Skin	<input type="checkbox"/> Red Hair	<input type="checkbox"/> Glasses	<input type="checkbox"/> Over 65 Yrs.	<input type="checkbox"/> Over 6'	<input type="checkbox"/> Over 200 Lbs.

Other identifying features: (1) 125543

WITNESS FEE G Witness fee of \$0 the authorizing traveling expenses and one day's witness fee:
 was paid (tendered) to the recipient was mailed to the witness with subpoena copy.

MILITARY SERVICE I asked the person spoken to whether defendant was in active military service of the United States or of the state of New York in any capacity whatsoever and received a negative reply. Defendant wore civilian clothes and no military uniform. The source of my information and the grounds of my belief are the conversations and observations above narrated.

Subscribed and Sworn to me this

March day of 21, 2008

Notary Signature: Zuleyda Concepcion

Name of Notary: ZULEYDA CONCEPCION
NOTARY PUBLIC OF NEW YORK
 Commission Expiration
 My Commission Expires Oct. 2, 2011

I, PAUL SALAZAR,
 was at the time of service a competent adult
 not having a direct interest in the litigation.
 I declare under penalty of perjury that the
 foregoing is true and correct.

Signature of Process Server

Date

3/19/08

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